

Name of Person Filing Document: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing Self Attorney for _____

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the matter of the Guardianship of _____

Case Number: JG _____

CONSENT OF PARENT TO GUARDIANSHIP OF MINOR CHILD (AND WAIVER OF NOTICE)

_____ A Minor

REQUIRED INFORMATION FROM PARENT, UNDER OATH or AFFIRMATION:

1. INFORMATION ABOUT ME:

Name: _____

Street Address: _____

City, State, Zip Code: _____

Telephone: _____ Date of Birth: _____

I am the MOTHER or FATHER of the minor child(ren) named above, who needs a guardian.

2. I have read the Petition for Permanent Appointment of Guardian of a Minor and consent to the appointment of (name) _____ to be the guardian of the minor child(ren).

3. (OPTIONAL) I waive notice of all further proceedings in this matter. I understand that I can reverse this waiver by filing a written document with the court under this court case number declaring that I no longer waive notice of hearings and other court proceedings.

OATH OR AFFIRMATION OF THE PARENT

I have read, understood, and completed the above statements. Everything I have said is true and correct to the best of my knowledge, information and belief.

SIGNATURE: _____

Signed and sworn to or affirmed before me this _____ by:
date: _____

Michael K. Jeanes, Clerk of Superior

_____ Court

Notary

OR

My commission expires: _____ By: _____
Deputy Clerk